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Bib Data Sheet

CONFIRMATION NO. 2854

| SERIAL NUMBER | FILING DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
|--|---|--|------------------------------------|---|-------------------|-------------------------|
| 09/762,223 | 05/07/2001 RULE | 606 | 3736 | 78014.018 | | |
| APPLICANT'S Anthony Walter Anson, Middlesex, UNITED KINGDOM; Brian Ridley Hopkinson, Nottingham, UNITED KINGDOM; Waqar Syed Yusuf, Wollaton, UNITED KINGDOM; ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/GB99/02544 08/03/1999 ** FOREIGN APPLICATIONS ***** UNITED KINGDOM 9816800.8 08/03/1998 UNITED KINGDOM 9816802.4 08/03/1998 ** SMALL ENTITY ** | | | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature Initials | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWING 12 | TOTAL CLAIMS 1 | INDEPENDENT CLAIMS 1 |
| ADDRESS Dewitt Ross & Stevens 8000 Excelsior Drive Suite 101 Madison, WI 53717-1914 | | | | | | |
| TITLE Devices and methods for the repair of arteries | | | | | | |
| FILING FEE RECEIVED 495 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____ | | |

DO/EQ BIBLIOGRAPHIC DATA ENTRY

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|------------------------------|-------------------|---------------------------|--------------------|
| SERIAL NUMBER: | 09 / 762223 | RECEIPT DATE: | 02 / 02 / |
| IA NUMBER: | PCT/ GB99 / 02544 | IA FILING DATE: | 08 / 03 / |
| FAMILY NAME: | ANSON | DELAY WAIVED (Y/N): | |
| GIVEN NAME: | ANTHONY W. | DEMAND RECEIVED (Y/N): | |
| PRIORITY CLAIMED (Y/N): | Y | PRIORITY DATE: | 08 / 03 / |
| NO BASIC FEE (Y/N): | N | US DESIGNATED ONLY (Y/N): | |
| ATTORNEY DOCKET NUMBER: | 78014.018 | COUNTRY: | |
| CORRESPONDENCE NAME/ADDRESS: | CUSTOMER NUMBER: | 000000 | TELEPHONE 6088312: |
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 APPLICATION TITLES:

DEVICES AND METHODS FOR THE REPAIR OF ARTERIES

TAB TO LAST POSITION, PUSH SEND